## PART B - FEE(S) TRANSMITTAL

Complete and mail this form, together with applicable fee(s), to:

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PILLSBURY WINTHKOP ELP P.O. Box 10500
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTNY DKT. NO.	CONFIRMATION NO.
10/059,156	01/31/2002	Satoshi Shibata	P 290678 T2HK- 01S0749-1	6521

TITLE OF THE INVENTION: APPARATUS AND METHOD FOR HEAD POSITIONING CONTROL IN DISK DRIVE

TOTAL CLAIMS	APPLN.	TYPE	SMALL EN	TITY   IS	SUE FEE	PUBLICATION	FEE T	OTAL FEE(S) DUE	DUE DATE			
17	nonprov	nonprovisional NO \$			\$1330	\$300		\$1,630	09/28/2004			
EXAMINER		AF	ART UNIT CLAS		SS-SUBCLAS	S-SUBCLASS						
SLAVITT, MITCHELL R			2651	3	60-077040	<del></del>						
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address attached.  "Fee Address" indication attached.					2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)												
PLEASE NOTE: Un assignment has been assignment. (A) NAME OF ASSI	previously GNEE	ignee is i submitte	identified belov d to the USPT(	v, no assignee O or is being s	submitted und	er separate cover. C DENCE: (CITY and	ompletion o	f assignee data is only a of this form is NOT a su R COUNTRY)	appropriate when an bstitute for filing an			
					•	•						
Please check the appropriate assignee category or categories (will not be printed on the patent)  individual individual corporation or other private group entity government												
4a. The following fee(s) are enclosed:												
		NTYAN	D TRADEMAI	RKS is request	ed to apply th	e Issue Fee and Publi	cation Fee (	if any) to the application	identified above.			
(Authorized Signature) Jeffrey D. Karceski, Re Note: The Issue Fee an applicant; a registered a of the United States Pat Burden Hour Statemen on the needs of the ind should be sent to the C D.C. 20231. DO NO AND THIS FORM TO	g. No. 35,9 nd Publicat attorney or ent and Tra t: This form ividual case thief Inform T SEND F	ion Fee agent; or demark (in is estimate. Any contains Of EES OR	(if required) we the assignee of Office. In the assignment of the Officer, United Second PLETER.	2 hours to co e amount of t tates Patent at D FORMS TO	epted from a in interest as implete. Time ime required and Trademark of THIS ADD	shown by the record e will vary depending to complete this form to Office, Washington RESS. SEND FEE	g n n,					
22313-1450												

09/24/2004 RFEKADU2 00000082 033975 10059156

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